

Best Available Copy

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		12/2/99
O.I.P.E. CLASSIFIER		4B	12/8/99
FORMALITY REVIEW	DB	65373	12/27/99 1-18-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
7-18-02	
2-2-03	
6-2-04	
10-1-04	
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50-1-04	

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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